



## Supplemental Application Data Sheet

### Application Information

Application number:: 10/696,735

Filing Date:: 10/28/03

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??:

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: Techniques For Using A Captured Image For The  
Retrieval Of Multimedia Documents Recorded  
Information

Attorney Docket Number:: 015358-009440US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure::

Total Drawing Sheets:: 11

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type: Inventor  
Primary Citizenship Country: Canada  
Status: Full Capacity  
Given Name: Berna  
Middle Name:  
Family Name: Erol  
Name Suffix:  
City of Residence: Burlingame  
State or Province of Residence: CA  
Country of Residence: US  
Street of Mailing Address: 1422 Bellevue Avenue, Unit 105  
City of Mailing Address: Burlingame  
State or Province of mailing address: CA  
Country of mailing address:  
Postal or Zip Code of mailing address: 94010

Applicant Authority Type: Inventor  
Primary Citizenship Country: US  
Status: Full Capacity  
Given Name: Jonathan  
Middle Name: J.  
Family Name: Hull  
Name Suffix:  
City of Residence: San Carlos  
State or Province of Residence: CA  
Country of Residence: US  
Street of Mailing Address: 751 Laurel Street, PMB 434  
City of Mailing Address: San Carlos

State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94070

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/462,412	04/11/03

### **Foreign Priority Information**

Country::	Application number::	Filing Date::
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### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::